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6		Application or Docket Number						
Effective October 1, 2001  ROL970010 7.2 U								
CLAIMS A	SMAL	LENTITY	OTHER THAN OR SMALL ENTITY					
TOTAL CLAIMS	29	· · · · · · · · · · · ·	RAT	FEE FEE	7	RATE	FEE	
FOR	NUMBER FILED NUMBER EXTRA		BASIC	FEE 370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS	29 minus 20=	• 9	X\$ 9=		OR	X\$18=	162	
INDEPENDENT CLAIMS	6 minus 3 = 3		X42=		OR	X84=	252	
MULTIPLE DEPENDENT CLAIM P	RESENT		+140a		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2				AL	OR	TOTAL	1154	
1 2 05 CLAIMS AS A	SMA	LL ENTITY	OR	OTHER SMALL				
Total CLAIMS REMAINING AFTER AMENDMENT Total Independent	HIGH NUM PREVI PAID	BER PRESENT DUSLY EXTRA	RAT	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Total	tofinus -	0 =	X\$ 9	-	OR	X\$18=		
Independent	Minus / Minus		X42		OR	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				a.	OR	+280=		
2/2/4			ADDIT, F	TAL EE	OR	TOTAL ADDIT, FEE		
0000 (Column 1)								
CLAIMS REMAINING AFTER AMENDMENT Total Independent	HIGH NUM PREVK PAID	BER PRESENT DUSLY EXTRA	RATI	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Total •	Minus	• /	X\$ 9	•	OR	X\$18=		
Independent FIRST PRESENTATION OF MU	Minus /	CLAIM	X42		OR	X84=	•	
			+140	-	OR	+280=		
			ADDIT. F		OR	TOTAL ADDIT, FEE		
(Column 1)	(Colum					•		
CLAIMS REMAINING AFTER AMENDMENT  Total  Independent  Independent	HIGH NUMI PREVIO PAID	BER PRESENT DUSLY EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Total •	Minus 🐽	. •	X\$ 9:		OR	X\$18=		
Independent •	Minus •••	-	X42=		OR	X84=		
FIRST PRESENTATION OF ML		-	OR					
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.						+280= TOTAL		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE  The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate bo								
The "Highest Number Previously Pai	d For* (Total or Independe	ent) is the highest number h	ound in the	appropriate box	in cot	ymn 1.		